

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		<i>Ch</i>	<i>7/29</i>
O.I.P.E. CLASSIFIER		<i>21</i>	<i>8/4/99</i>
FORMALITY REVIEW	<i>Ch</i>	<i>71423</i> <i>71473</i>	<i>8-13-99</i> <i>9-21-99</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	4/9/04
2	17/30/04
3	27/04/04
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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